FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

, <u> </u>	MB APPROVA	AL
050	49822	
Prefix		Serial

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D.

SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMPTION

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.) Class B Units of Membership Interests in Limited Liability Company []Section 4(6) [] ULOE Filing Under (Check box(es) that apply): [] Rule 504 [] Rule 505 [X]Rule 506

Type of Filing: [X] New	w Filing [] Amendment	FINANCIAL
	A. BASIC IDENTIFICATION DAT	A
1. Enter the information rec	uested about the issuer	
Name of Issuer Emergency Vehicle Supply	\L 3	and name has changed, and indicate change.)
Address of Executive Office 4661 Johnson Road, Suite	(Number and Street, City, State, Zip Code) 1, Coconut Creek, Florida 33073	Telephone Number (Including Area Code) (954) 428-5201
Address of Principal Busine (if different from Executive	•	Telephone Number (Including Area Code) (if different from Executive Offices)
	er for emergency fire, police, utility/construction vehicles	
Type of Business Organizat		
[] corporation	[] limited partnership, already formed	[X] other (please specify: Limited Liability Company
[] business trust	[] limited partnership, to be formed	
Actual or Estimated Date of	Incorporation or Organization: Month Year	[X] Actual [] Estimated

GENERAL INSTRUCTIONS

CN for Canada; FN for other foreign jurisdiction)

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6). When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

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Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State:

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control

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A. BASIC IDENTIFICATION

- 2. Enter the information requested for the following:
- Each promoter of the issuer, if the issuer has been organized within the past five years:
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	[X] Promoter	[X] Beneficial Owner	[X] Executive Officer	[]Director	[X] General and/or Managing Partner
Full Name (Last name first, if in J. Bradley Badal	dividual)				
Business or Residence Address 4661 Johnson Road, Suite 1, C					
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if in Robert G. Windesheim	dividual)				
Business or Residence Address 4661 Johnson Road, Suite 1, C					
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[X] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if ir	dividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[]Director	[] General and/or Managing Partner
Full Name (Last name first, if ir	idividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if ir	idividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)	····		
Check Box(es) that Apply:	[] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[] General and/or Managing Partner
Full Name (Last name first, if ir	ndividual)				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			

,													
				R. i	INFORMA	TION ARC	OUT OFFEI	RING					
1. Has the i	ssuer sold, o	or does the i	ssuer intend								Yes [X]	No []	
	the minimur			e accepted	from any ind	dividual?	2, if filing u	ander ULOI	Ξ.		\$ 15	,000*	
4. Enter the similar remu associated pudden. If m	uneration fo person or ag	n requested r solicitatio ent of a bro e (5) persor	for each pe n of purchas ker or deale is to be liste	erson who hasers in conner registered	as been or wection with with the SI	sales of secu EC and/or w	urities in the vith a state o	offering. I	f a person to the name of	commission to be listed is of the broker the informat	an or	No []	
Full Name (Last name f	irst, if indiv	ridual)										
Business or	Residence A	Address (Nu	ımber and S	treet, City,	State, Zip C	ode)							
Name of As	sociated Bro	oker or Dea	ler				<u> </u>						
States in W	hich Person	Listed Has	Solicited or	Intends to S	Solicit Purch	nasers							
(Check "All	States" or o	check indivi	idual States))							All State	All States []	
[AL] [IL] [MT] [RI] Full Name ([AK] [IN] [NE] [SC] (Last name f	[AZ] [IN] [NE] [SC] irst, if indiv	[AR] [IN] [NE] [SC]	[CA] [IN] [NE] [SC]	[CO] [IN] [NE] [SC]	[CT] [IN] [NE] [SC]	[DE] [IN] [NE] [SC]	[DC] [IN] [NE] [SC]	[FL] [IN] [NE] [SC]	[GA] [IN] [NE] [SC]	[HI] [IN] [NE] [SC]	[ID] [IN] [NE] [SC]	
Business or	Residence A	Address (N	umber and S	Street, City,	State, Zip C	ode)			 -	<u>-</u>	· ,		
Name of As	ssociated Br	oker or Dea	ler					 -	<u>.</u>				
States in W	hich Person:	s Listed Has	Solicited o	r Intends to	Solicit Puro	chasers		.					
	l States" or o										All State	s []	
[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IN] [NE]	[AR] [IN] [NE]	[CA] [IN] [NE]	[CO] [IN] [NE]	[CT] [IN] [NE]	[DE] [IN] [NE]	[DC] [IN] [NE]	[FL] [IN] [NE]	[GA] [IN] [NE]	[HI] [IN] [NE]	[ID] [IN] [NE]	

(Check "Al	1 States" or	check indiv	idual States)							All State	es []
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IN]	[IN]	[IN]	[IN]	[IN]	[IN]	[IN]	[IN]	[IN]	[IN]	[IN]
[MT]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]
[RI]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]
Full Name	(Last name	first, if indi	vidual)									

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer

States in Which Persons Listed Has Solicited or Intends to Solicit Purchasers

(Check "All	States" or	check indivi	idual States))							All State	es []
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IN]	[IN]	[IN]	[IN]	[IN]	[IN]	[IN]	(IN)	[IN]	[IN]	[JN]
[MT]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]	[NE]
[RI]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]	[SC]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount al sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, chec box 9 and indicate in the columns below the amounts of the securities offered for exchange	ck this	
already exchanged. Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$
Equity	\$	\$
[] Common [] Preferred Convertible Securities (including warrants)	\$ \$	\$
Other (Specify) Membership Interests in limited liability company Total	\$ 1,200,000 \$ 1,200,000	\$ <u>0</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
Inter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	Number of Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	0	S 0
Non-accredited Investors	0	\$ 0
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE		
this filing is for an offering under Rule 504 or 505, enter the information requested for all securities old by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of Offering NOT APPLICABLE	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. Printing and Engraving Costs includes mailing. Legal Fees. Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately). Other Expenses (Identify) filing fees, travel and miscellaneous expenses	[] [X] [X] [] [] []	\$ 0 \$ 1,000 \$ 25,000 \$ 0 \$ 0 \$ 9,000
	• •	

Ъ.					
	"adjusted gross proceeds to the issue				\$1,165,00
ea ch	icate below the amount of the adjusted ch of the purposes shown. If the amo leck the box to the left of the estimate. oss proceeds to the issuer set forth in re-	unt for any purpose is not known, furn The total of the payments listed mus	ish an estimate and	i	
				Payments to Officers, Directors, & Affiliates	Payments to Others
				\$0 [] \$
	Purchase of real estate		\$0 []	
	Purchase, rental or leasing and instal		\$0 [<u> </u>	
	Construction or leasing of plant build	\$ <u> </u>	3		
		ncluding the value of securities involved change for the assets or securities			
				\$ 0 [1 \$
				s 0 [·
				\$ 1,165,000	\$] \$
	<u> </u>		• •	\$	\$
			[]	\$[]	\$
				\$ <u>1,165,000</u> [] \$
	Total Payments Listed (column total	s added)	[X]	\$ <u>1,165,0</u>	<u>)00</u>
		D. FEDERAL SIGN	ATLIDE		
The is	suer has duly caused this notice to be si			tice is filed under Rule 50	5 the following signature
consti	tutes an undertaking by the issuer to fur hed by the issuer to any non-accredited	nish to the U.S. Securities and Exchange	Commission, upor	n written request of its sta	ff, the information
	(Print or Type)	Signature	Da	te	
Emer	gency Vehicle Supply Company, L.L.	c.		April 1, 2005	
Name	of Signer (Print or Type)	Title of Signer (Print or Type)			
	idley Badal	Manager, President and CEO			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	•	E. STATE SIGNATU	RE						
1. provision	Is any party described in 17 CFR 230.25 as of such rule?	2(c), (d), (e) or (f) presently subject	to any of the disqualification	Yes	No [X]				
		See Appendix, Column 5, for st	ate response.						
2. CFR 239	The undersigned issuer hereby undertak (500) at such times as required by state la		or of any state in which this notice is	filed, a notice on I	Form D (17				
3. offerees.	The undersigned issuer hereby undertain	kes to furnish to the state administra	ators, upon written request, information	on furnished by th	ne issuer to				
	The undersigned issuer represents that Exemption (ULOE) of the state in which festablishing that these conditions have be	h this notice is filed and understands							
	er has read this notification and knows the person.	e contents to be true and has duly ca	used this notice to be signed on its be	half by the under	signed duly				
	rint or Type) ncy Vehicle Supply Company, L.L.C	Signature	Date April 1, 2	, 2005					
	Signer (Print or Type) ey Badal	Title of Signer (Print or Type) Manager, President and CEO							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to non-ac investors (Part B-	to sell ecredited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)*					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Membership Interest	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL											
AK											
ΑZ											
AR											
CA											
со											
СТ											
DE											
DC											
FL	X	-		*	*	*	*	1.	X		
GA				····				-			
HI											
ID											
IL	X			*	*	*	*		X		
IN						**********					
lA											
KS							† · · · · · · · · · · · · · · · · · · ·				
KY											
LA						, , ,					
ME				······································							
MD	X			*	*	*	*		X		
MA				<u></u>							
MI	X			*	*	*	*		X		
MN				<u> </u>							
MS											
МО											

				APP	ENDIX					
1		2	3 Type of security			4		5 Disquali under Sta	fication	
	Intend	to sell	and aggregate		(if yes,	attach				
		ccredited	offering price		Type of in	vestor and		explana		
1		s in State	offered in state			hased in State		waiver granted) (Part E-Item 1)		
	(Part B	3-Item 1)	(Part C-Item 1)		(Part C-	Item 2)*		(Pan E-	item ()	
State	Yes	No	Membership Interest	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МТ				Investors		Thvestors				
NE										
NV										
NH										
NJ	X			*	*	*	*		X	
NM								-		
NY	X			*	*	*	*		X	
NC										
ND										
ОН	X			*	*	*	*		X	
ок										
OR							}		· 	
PA										
RI										
SC										
SD										
TN	X			*	*	*	*		X	
TX										
UT										
VT										
VA										
WA										
wv										
WI				 -						
WY PR										
PK.	1	1	1 1		l	l		L	<u> </u>	

^{*}No Membership Units have been sold to date.

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